

TOWNSHIP FIRE DEPARTMENT CHAPTER 1: ADMINISTRATIVE OPERATIONS	
Part 3: Job Descriptions Subject: Emergicare Page 1 of 15 Effective Date: 05-28-14	Section: 1- 3 -26 Reviewed/Revised Date: 10-05-16

26.01 Purpose. To provide an explanation of requirements and expectations for Emergicare members.

26.02 Goal. To provide a written policy regarding Emergicare membership.

26.03 Definitions.

Associate Member - Any member who is accepted only as a member of the Emergicare division and meets the definition of a Member.

Member – Refers to any member who is hired by Township Fire Department Inc., assigned to the Emergicare Division and meets the requirements of the Division prior to and during appointment

EMR – Emergency Medical Responder

26.04 General Statement: There are requirements that must be met and maintained to become a member of Emergicare. They are outlined below under Qualifications.

26.05 Qualifications Prior to Acceptance.

- A) Must be at least eighteen (18) years of age.
- B) Must hold current CPR & AED certification.
- C) Must hold current training at the level of EMR, EMT, or Paramedic.
- D) Must hold the credentials necessary to obtain an EMR license issued by the State of WI. (Compliance is mandatory)
- E) Must hold current credentialing on the E-Licensing web site listing “Emergicare, Division of Township Fire Department” as the credentialed agency
- F) Must have a valid driver’s license.
- G) Must complete annual Blood Borne Pathogens training each year.

Subject: Emergicare

Page 2 of 15

Date: 05-28-14

- H) Must be interviewed and pre-approved by the Chief of Rescue Services and/or their designee(s).
- I) Must be physically capable of performing the duties of an EMR. Applicants or members with physical limitations including, but not limited to known heart disease, epilepsy, or respiratory disease shall not participate in any Emergicare related duties until a physician certifies that they are fit to participate.
- J) New members must complete an orientation with the Captain of EMS prior to being issued-gear and responding to any calls for service.

26.06 Qualifications to Maintain Membership.

- A) Must hold current CPR & AED certification.
- B) Must hold a valid EMS License (EMR, EMT) with the State of Wisconsin.
- C) Must have provided proof of required training to the Chief of Rescue Services or the Chief of Training and Safety.
- D) Must maintain the credentials necessary to obtain an EMR license issued by the State of WI. (Compliance is mandatory)
- E) Must complete annual Blood Borne Pathogens training by the specified date each year.
- F) Must have attended seventy five (75) percent of the Emergicare trainings and meetings for the year previous, unless excused prior to the meeting and/or training.
- G) Must have responded to at least six (6) Emergicare calls per year.

26.07 Training.

- A) Township Fire Department will cover the cost for current fire department members wishing to take EMR training if the person has been pre-approved by the Chief of Rescue Services.
- B) Associate Applicants for Emergicare will pay for their own EMR tuition. Upon successful completion of one year of service the cost of the class tuition will be reimbursed to the member at the current rate of the EMR program.

- C) Township Fire Department will pay the tuition cost of recertification training for members that are in good standing with Emergicare. Members paying for the tuition out of pocket will be reimbursed once they have provided a receipt and completed a request for payment.
- D) Emergicare members will be paid for attendance at monthly trainings. The rate of pay will be determined by the current budget.

26.08 Termination of Membership

- A) Members who fail to meet the above listed Qualifications will be asked to return the equipment they were issued and will be removed from Emergicare.

26.09 Equipment and Uniforms

- A) All equipment and uniforms issued by the organization shall remain property of the organization and shall be kept clean, sanitary, and in full operating condition by each member. Each member will be financially responsible for all their issued equipment and uniforms. Uniforms and equipment shall be used only for emergencies, or official functions of the organization.
- B) The cost of providing all members advance care equipment is cost prohibitive. To best serve the needs of our community, the department will purchase a few of these devices and distribute them to the most active members. These devices are intended to be available to respond at all times. Members, who are out of town, are expected to share the equipment with others who are available to respond during their absence.

26.10 Appearance

- A) Members shall maintain a reasonably neat and clean appearance. Provisions for personal cleanliness and sanitation shall be on an individual basis. Members shall be dressed appropriately for the type of emergency response they are dispatched to.

26.11 Alcohol & Drugs Usage

- A) A 0.00% blood alcohol concentration level shall be maintained while responding to or at the scene of any emergency.

Subject: Emergicare
Page 4 of 15
Date: 05-28-14

- B) No member shall respond to an incident while using any drug or medication that could affect normal judgment, or driving abilities.

26.12 Tobacco Use

- A) No member shall use any tobacco product while at the scene of an incident.

26.13 Injuries

- A) All injuries must be reported to the Chief of Rescue Services. Additionally, a Workman's Comp form and TFD injury report form shall be filled out within 24 hours of that injury.

26.14 Disability

- A) Any member who is receiving workers compensation benefits from Township Fire Department or another employer shall not respond with this organization while receiving such benefits, unless reviewed and authorized to do so by the Chief of Rescue Services and the Board of Directors.

26.15 Exposures

- A) Any exposure shall be treated, reported, and documented in accordance with Departmental procedure 1-2-13: Bloodborne Pathogen Policy.

26.16 Incident Reporting

- A) A run report shall be completed for each emergency response call.
- B) Run reports are used to document who responded to a call, what services were provided, what each responder did at the scene and what equipment was used.
- C) Members shall not receive credit for responding to a call for service unless a run report has been completed in WARDS.

26.17 Scope of Practice

All Emergicare personnel are licensed as a Wisconsin EMR and shall provide care within the parameters for EMR set forth by the State of Wisconsin and the protocols set forth by the medical director. Advanced skills may be practiced when the following criteria are met:

- A) Emergicare's State of Wisconsin provider license is amended to allow practicing of an advanced skill.
- B) Emergicare personnel are trained to this level
- C) New members shall be trained to this new level within 90 days of acceptance.
- D) Medical director has approved this training.

26.18 Responding to calls for service

- A) Emergicare personnel responding to calls for service will normally be dispatched by the Eau Claire Emergency Center.
- B) Emergicare personnel shall respond to the scene in their personal vehicles code one (per department policy) unless authorized for red light and siren by the Chief of Township Fire Department.
- C) The number of Emergicare personnel required at a scene will vary depending on the type of call.
- D) Emergicare personnel in the area of a call may respond.
- E) Emergicare personnel responding to a call shall use their two-way radio and advise the following:
 - 1. Their unit number
 - 2. That they are responding to the incident address.
 - 3. The location from where they are responding.
- F) Emergicare personnel shall indicate on the radio when they arrive on scene.
- G) Emergicare personnel shall park their personal vehicle at the incident scene in a location that does not impede the conveyance of other emergency vehicles on scene or, if on a highway, on the same side of the road as the incident in the appropriate direction of travel.

- H) Upon making patient contact the Emergicare personnel shall wear a hi visibility vest (if on a highway) and/or ID, determine number of patients, triage if necessary, provide treatment within the scope of training for an EMR and provide patient information to the responding ambulance service. If multiple patients are present, additional ambulances may be required.
- I) In the event a patient refuses care, notify the ambulance to respond non-emergent and that the patient is refusing care at this time. The responding ambulance will make patient contact and obtain a signed release.
- J) Equipment used at the scene shall be replaced by the ambulance service prior to leaving the scene.
- K) If responding Emergicare personnel feel they will need the assistance from Township Fire Department, they may request the Eau Claire Communications Center to dispatch Township Fire Department.

26.19 Response Cancellation

- A) Members shall immediately cancel their response upon direction of; another EMR on scene, law enforcement official on scene, the responding ambulance or by the direction of the Eau Claire Communications center.
- B) Members may cancel the responding ambulance only when there are no patients present.

26.20 Ambulance Operation

- A) Emergicare members may be required to drive the ambulance or assist the paramedics with patients with severe medical conditions or severe traumatic injuries.
- B) Only members of Township Fire Department and Emergicare, who have received authorization to drive department (TFD) vehicles, and received authorization from Eau Claire Fire Department may drive an ambulance using red lights and siren. See SOG 2-1-2 –Vehicle Operation.

26.21 Transport Destination

- A) Members may inquire as to the preferred hospital destination from the patient, family or close friends and relay the information to the responding ambulance.
- B) Under no circumstances shall the member recommend or make the decision where the patient is transported.

26.22 Motor Vehicle Operation (Personal)

- A) Any member responding to any call or function, whether with or without emergency lights, shall operate that vehicle in a reasonable and prudent manner while obeying all traffic laws.

26.23 Emergency Lights

- A) Members may, after one year of active service with the department, request authorization to use a single, red light at the scene of an emergency.
- B) The intent of this authorization will allow the member to provide scene protection, scene identification, and identification as an emergency responder.
- C) Authorized members may use their red light:
 - 1. To identify themselves at a highway incident as an emergency responder to law enforcement or other vehicles traveling by.
 - 2. To identify themselves at police roadblocks as an Emergency Responder
 - 3. To identify themselves at an EMS scene to other units that will arrive
 - 4. The light(s) may be activated upon entering the freeway ramp closest to the scene in proper direction of travel, (HWY 53 Free Way and I-94) while responding to a call on that highway. All traffic laws must be obeyed and department guidelines followed.

Subject: Emergicare

Page 8 of 15

Date: 05-28-14

- D) Authorization for a red light is valid for one year and must be renewed annually. In addition this authorization is valid as long as the applicant is a member of Emergicare, has a valid EMS license issued by the State of Wisconsin and is credentialed with Township Fire Department.
- E) The authorization may be revoked by the Chief of Rescue Services or the Chief of Township Fire Department.
- F) Members who are officers of the department, have emergency lights, sirens and are authorized by Township Fire Dept. may use them in conjunction with their duties as a licensed medical responder following department regulation (TFD SOG 2-1-3)
- G) Authorized Members may use red light and siren when the following conditions apply:
 - 1. The EMS call is dispatched as a B-Bravo, C-Charlie or D- Delta response and;
 - 2. The member is in close proximity to the call and will be the 1st or second Emergicare member to arrive prior to the ambulance or;
 - 3. The nature of the call or on scene personnel indicates that additional personnel are required at the scene without delay.

26.24 Responses to Specific Types of Incidents

A) Crashes

Crashes present the potential for multiple hazards for emergency response personnel. Emergicare personnel shall park on the same side of the road as the crash and in front of the crash or in front of an emergency vehicle on the scene. At no time should the emergency response personnel park on skid marks or any other evidence involved in the crash. Emergency response personnel shall wear a reflective vest or firefighter turn-out gear and vest while on scene of a crash. Always be aware of vehicle traffic at the scene. Other hazards would include fuel spills, unstable vehicles and vehicles carrying hazardous materials. Observe the scene and advise the Communications Center of these hazards so appropriate services respond. Determine the number of patients; triage accordingly, advise the Communications Center to dispatch appropriate number of ambulances or air ambulance(s) as needed.

B) Extrications

Vehicle extrications shall be conducted by trained fire department personnel using proper techniques and equipment. Emergicare personnel shall work with the fire department and ambulance personnel during the extrication process. Firefighter turnout gear may be required during the extrication process requiring the ERT to temporarily remove themselves from the scene if proper personal protective equipment is not available. Once the scene is safe or the patient is removed from the hazardous area the emergency response personnel may resume patient care.

C) Special Rescue

Personnel conducting specialized rescues must be trained to the level of the rescue required. Emergency response personnel not trained in the rescue shall remain in the staging area until the patient is rescued and is in an area free of harm. At this point the emergency response personnel may begin patient care.

D) Hazardous Materials

All Associate Emergicare members shall be trained to the Hazardous Materials Awareness level training. Emergicare members, who are also on the fire department, shall be trained to Hazardous Materials Operations level training. All Emergicare personnel shall always remain in the "cold" zone during all hazardous material incidents. Emergicare personnel shall only make patient contact after the patient has been removed from the "hot" zone and received proper decontamination.

E) Violent Calls

Periodically emergency response personnel may receive a call for service that involves violence where the scene may not be secure. In those cases the emergency response personnel shall stage a safe distance from the scene and await the arrival of law enforcement. Once law enforcement has the scene secure, emergency response personnel will be notified by radio to proceed to the scene. Even after the scene is secured by law enforcement, the emergency response personnel should remain aware of their surroundings as conditions may change.

26.25 Respiratory Protection Program

A) Program Scope and Application

This program applies to all members of the EMS service who could potentially be exposed to airborne respiratory illnesses during normal work operations, and during non-routine or emergency situations.

B) Identifying Work Hazards

The respirators selected will be used for respiratory protection when providing direct care to a patient who has a potentially airborne infectious disease or when in a closed space with this type of patient. These respirators do not provide protection from chemical exposure.

C) Respirator Selection

Only respirators approved by the National Institute for Occupational Safety and Health (NIOSH) will be selected and used.

A N95 respirator is a type of disposable particulate respirator. It protects by filtering particles out of the air you breathe. A N95 respirator is used when Airborne Precautions are required when providing care to a patient with an infectious or suspected infectious disease.

D) Medical Evaluation

A formal medical evaluation form will be completed once every five years. An informal questionnaire will be completed during the subsequent four years. All evaluations and questionnaires are to be kept in the responder's file.

Persons assigned to tasks that may require respiratory protection must be physically able to perform the tasks while wearing a respirator.

The Chief of Training & Safety will either complete or arrange for individual medical clearance by a medical questionnaire and/or medical exam. Review of medical evaluations or questionnaires can be reviewed by the Medical Director, Public Health Nurse, or other resource within the agency with a minimum LPN licensure. Employees refusing a medical evaluation will not be allowed to work in conditions requiring respirator use.

Subject: Emergicare
Page 11 of 15
Date: 05-28-14

If responders who are fit tested as a part of other employment, they do not need to be fit tested again by the EMS agency. However, these records need to be made available to the EMS agency.

Re-evaluation will be conducted under these circumstances:

1. EMS service member reports physical symptoms that are related to the ability to use a respirator. (wheezing, shortness of breath, chest pain, etc.)
2. It is identified that an EMS service member is having a medical problem during respirator use.
3. The healthcare professional performing the evaluation determines an EMS service member needs to be re-evaluated and the frequency of the evaluation.
4. A change occurs in the workplace conditions that may result in an increased physiological burden on the EMS service member.
5. EMS service member facial size/shape/structure has changed significantly.

All examinations and questionnaires are to remain confidential between the employee and the individual completing the medical evaluation.

E) Fit Testing

After the initial fit test, fit tests must be completed at least annually or more frequently if there is a change in status of the wearer or if the EMS Service changes model or type of respiratory protection. As of 7/1/04 the OSHA Respiratory Protection Standard 29 CFR 1910.134 applies to health care workers. This template will be changed to reflect the most current OSHA regulations as new information becomes available.

Fit tests are conducted to determine that the respirator fits the user adequately and that a good seal can be obtained. Respirators that do not seal do not offer adequate protection.

Fit testing is required for tight fitting respirators including N95 respirators.

Fit tests will be conducted:

1. Prior to being allowed to wear any respirator.
2. If the EMS service changes respirator product.
3. If EMS member changes weight by 10% or more.
4. If EMS member has changes in facial structure or scarring.
5. As Occupational Safety and Health Administration (OSHA) standards require.

Persons who have facial hair are not able to be fit tested for a N95 respirator. They will be given information regarding this limitation and will need to make a decision regarding their level of contact if encountering a known infectious patient.

F) Proper Respirator Use

1. General Use

EMS members will use their respirators under conditions specified by this program, and in accordance with the training they receive on the use of the selected model(s). In addition, the respirator shall not be used in a manner for which it is not certified by the National Institute for Occupational Safety and Health (NIOSH) or by its manufacturer.

2. All users shall conduct positive and negative pressure user seal checks each time they wear a respirator.
3. All users shall leave a potentially contaminated work area to change their respirator if the respirator is impeding their ability to work.

G) Cleaning and Disinfecting

1. N95 – disposable

- A) If patient is not in Contact Precautions (e.g., TB), discard if soiled, if breathing becomes labored, or if structural integrity is compromised.
- B) If patient in Airborne Precautions is also in Contact Precautions (e.g., SARS, smallpox), discard after use.

H) Inspecting, Maintenance and Repairs

All types of respirators should be inspected prior to use.

N95 - disposable

1. Examine the face piece of the disposable respirator to determine if it has structural integrity. Discard if there are nicks, abrasions, cuts, or creases in seal area or if the filter material is physically damaged or soiled.
2. Check the respirator straps to be sure they are not cut or otherwise damaged.
3. Make sure the metal nose clip is in place and functions properly (if applicable).

I) Respirator Training

EMS members will be trained prior to the use of a respirator and thereafter when deemed necessary by the Respiratory Program Administrator.

Training will include:

1. Identify hazards, potential exposure to these hazards, and health effects of hazards.
2. Respirator fit, improper fit, usage, limitations, and capabilities for maintenance, usage, cleaning, and storage.
3. Emergency use if applicable.
4. Inspecting, donning, removal, seal check and trouble shooting.
5. Explaining respirator program (policies, procedures, OSHA standard, resources).

J) Evaluating/Updating Program

The Respiratory Program Administrator will complete an annual evaluation of the respiratory protection program.

1. Evaluate any feedback information or surveys.
2. The Respiratory Program Administrator will review any new hazards or changes in policy that would require respirator use.

3. The Respiratory Program Administrator will make recommendations for any changes needed in the respiratory protection program.

K) Roles and Responsibilities

1. Respiratory Program Administrator (RPA)

Respiratory Program Administrator is responsible for administering the respiratory protection program.

Duties of the RPA include:

1. Monitor respirator use to ensure that respirators are used in accordance with their certification.
2. Distribute and evaluate education/medical questionnaire.
3. Evaluate any feedback information or surveys.
4. Arrange for and/or conduct training and fit testing.
5. Ensure proper storage and maintenance of respiratory protection equipment.

2. Supervisor

The Supervisor for the respiratory protection program may also be the Respiratory Program Administrator. Supervisors are responsible for ensuring that the respiratory protection program is implemented in their particular units.

In addition to being knowledgeable about the program requirements for their own protection, Supervisors must also ensure that the program is understood and followed by the employees under their charge.

Duties of the Supervisor include:

1. Knowing the hazards in the area in which they work.
2. Knowing types of respirators that need to be used.
3. Ensuring the respirator program and worksite procedures are followed.
4. Enforcing/encouraging staff to use required respirators.
5. Ensuring employees receive training and medical evaluations.
6. Coordinating annual retraining and/or fit testing.

Subject: Emergicare
Page 15 of 15
Date: 05-28-14

7. Ensure proper storage and maintenance of all respirators.

3. EMS Member

1. Participate in all training.
2. Wear respirator when indicated.
3. Maintain equipment.
4. Report malfunctions or concerns.

L) Documentation and Record-keeping

The completed medical forms and documented medical recommendations are confidential and will remain with/in locked in the Medical Control Officers File Cabinet.

All relevant medical information must be maintained for the duration of the individual's service plus thirty years.